

CONGRESSIONAL BUDGET OFFICE COST ESTIMATE

March 18, 1998

H.R. 2843 Aviation Medical Assistance Act of 1998

As ordered reported by the House Committee on Transportation and Infrastructure on March 11, 1998

SUMMARY

H.R. 2843 would direct the Administrator of the Federal Aviation Administration (FAA) to reevaluate regulations regarding equipment in medical kits carried on certain aircraft and the training required of flight attendants in the use of such equipment. Specifically, the bill would direct the FAA to consider whether automatic external defibrillators should be required. H.R. 2843 also would direct the FAA to evaluate whether the agency should require such equipment in airports. The bill would require the FAA to announce its decisions within 19 months of enactment.

In addition, the bill would direct major air carriers to provide information to the FAA about medical incidents occurring on aircraft for the purpose of assisting the FAA in reevaluating the current regulations. The bill also would limit the liability of air carriers and individuals when assisting passengers in an in-flight medical emergency.

CBO estimates that enacting H.R. 2843 would have no significant impact on the federal budget. Because H.R. 2843 would not affect direct spending or receipts, pay-as-you-go procedures would not apply.

H.R. 2843 contains both intergovernmental and private-sector mandates as defined in the Unfunded Mandates Reform Act of 1995 (UMRA), but the expected costs of complying with those mandates would be well below the statutory thresholds established in UMRA.

ESTIMATED COST TO THE FEDERAL GOVERNMENT

Under current law, the FAA has the authority to regulate the medical equipment carried on aircraft; however, the agency does not have the authority to regulate medical equipment at airports, and it is unclear whether enacting H.R. 2843 would give the FAA authority to do

so. CBO estimates that the FAA would incur no significant costs to reevaluate medical equipment required on aircraft. Assuming that enacting H.R. 2843 would give the FAA authority to regulate medical equipment at airports, CBO estimates that additional discretionary outlays for the FAA to study and review whether such regulations should be proposed would total less than \$250,000, assuming appropriation of the necessary amounts.

ESTIMATED IMPACT ON STATE, LOCAL, AND TRIBAL GOVERNMENTS

The bill contains at least one intergovernmental mandate as defined in UMRA. By limiting the liability of air carriers and individuals who provide medical assistance during an in-flight emergency, the bill would preempt the liability laws of state and local governments. CBO estimates that this preemption would not impose any significant costs on state or local governments.

The bill would also direct the FAA to consider whether automatic external defibrillators should be required at airports, most of which are publicly owned. If imposed, such a requirement would be an intergovernmental mandate. Based on information from airports and the FAA, CBO estimates that the direct costs of such a requirement would be well below the statutory threshold for intergovernmental mandates (\$50 million in 1996, adjusted annually for inflation).

ESTIMATED IMPACT ON THE PRIVATE SECTOR

H.R. 2843 would impose a new private-sector mandate, as defined by UMRA, on major domestic air carriers. The bill would require approximately 10 air carriers to make a good faith effort to obtain information on their onboard medical incidents and to submit a quarterly report for a one-year period to the FAA. CBO estimates that the direct cost of complying with this mandate would fall well below the statutory threshold for private-sector mandates (\$100 million in 1996, adjusted annually for inflation).

The bill would also direct the FAA to consider whether automatic external defibrillators should be required on aircraft and at airports, but this would not be a new private-sector mandate. The FAA currently has the authority to require medical equipment on aircraft, and CBO expects that no private airports would be affected by such a requirement.

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